								application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								062891-0526					
CLAIMS AS FILED - PART I							SMALL ENTITY				OTHER	THAN	
(Column 1)						(Column 2)				OR	SMALL	ENTITY	
TOTAL CLAIMS			3.7					Έ	FEE		RATE	FEE	
FOR			NUMBER FILED NUM			ER EXTRA	BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			37 mir	nus 20=	. 17		X\$ 9	9=		OR	X\$18=	306	
INDEPENDENT CLAIMS			minus 3 =			<i>b</i>	X40=			OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM PE	RESENT /				+139				+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2						olumn 2	<u> </u>			OR		101/	
							TOT	AL		OR	TOTAL	1016	
CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)							SMALL ENTITY			OR	OTHER THAN OR SMALL ENTITY		
AMENDMENT A	*	CLAIMS REMAINING		HIGHE	ST	PRESENT	<u> </u>	-	ADDI-	1		ADDI-	
		AFTER AMENDMENT		PREVIO	USLY	EXTRA	RAT	Έ	TIONAL FEE		RATE	TIONAL FEE	
	Total	*	Minus	**	On	=	X\$ 9	<del></del>	, ,,,	OR	X\$18=	1 55	
	Independent	*	Minus	***		=	X40	=			X80=		
┖	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
							+135			OR	+270=		
							to addit.	TAL FEE		OR	TOTAL ADDIT. FEE		
		(Column 1)		(Colun		(Column 3)							
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA	RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	)=		OR	X\$18=		
	Independent	*	Minus	***		=	X40				X80=		
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT	CLAIM		/\ -			OR	7.00-		
							+135	)= 		OR	+270=		
							TO ADDIT. I	TAL		OR	TOTAL ADDIT. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=	X40:				X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
+135=										OR	+270=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											TOTAL ADDIT. FEE		
		mber Previously Pa ober Previously Pai							oropriate bo				